


TRANSMITTAL

Electronic Version v1.1
Stylesheet Version v1.1.0

Title of Invention	System and Method for Event Subscriptions for CORBA Gateway															
<div>Application Number: 09/552984 </div> <div>Date: 2000-04-21</div> <div>First Named Applicant: Sai V Allavarpu</div> <div>Confirmation Number: 7121</div> <div>Attorney Docket Number: 5181-48200</div> <div>RECEIVED FEB 12 2004 Technology Center 2100</div>																
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<table border="1"><thead><tr><th>Submitted by:</th><th>Elec. Sign.</th><th>Sign. Capacity</th></tr></thead><tbody><tr><td>Robert Kowert Registered Number: 39255</td><td>Robert Kowert</td><td>Attorney</td></tr></tbody></table>			Submitted by:	Elec. Sign.	Sign. Capacity	Robert Kowert Registered Number: 39255	Robert Kowert	Attorney								
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Comments

RAM Fee History
Query
Revenue Accounting and Management

Name/Number: 09552984

Total Records Found: 7

Start Date: Any Date

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount	Mailroom Date	Payment Method
08/15/2000	00000033	<u>1</u>	<u>101</u>	\$690.00	08/11/2000	CK
08/15/2000	00000034	<u>1</u>	<u>103</u>	\$324.00	08/11/2000	CK
08/15/2000	00000035	<u>1</u>	<u>105</u>	\$130.00	08/11/2000	CK
08/15/2000	00000036	<u>1</u>	<u>581</u>	\$40.00	08/11/2000	CK
09/09/2003	00000037	<u>1</u>	<u>1401</u>	\$320.00	09/08/2003	DA 501505
02/10/2004	00000053	<u>3</u>	<u>1806</u>	\$180.00	02/10/2004	DA 501505
02/18/2004	00000162	<u>1</u>	<u>1801</u>	\$770.00	02/13/2004	DA 501505



FEE TRANSMITTAL

Electronic Version v08
Stylesheet Version v08.0

Title of Invention	System and Method for Event Subscriptions for CORBA Gateway										
Application Number: 09/552984											
Date: 2000-04-21		RECEIVED FEB 12 2004 Technology Center 2100									
First Named Applicant: Sai V Allavarpu											
Attorney Docket Number: 5181-48200											
Art Unit: 2155											
Examiner: Khahn Q Dinh											
TOTAL FEE AUTHORIZED \$180											
Patent fees are subject to annual revisions on or about October 1st of each year.											
BASIC FILING FEE											
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Submission Of Information Disclosure Stmt Fee</td><td>1806</td><td>180</td><td>180</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Submission Of Information Disclosure Stmt Fee	1806	180	180
Fee Description	Fee Code	Amount \$	Fee Paid \$								
Submission Of Information Disclosure Stmt Fee	1806	180	180								
AUTHORIZED BILLING INFORMATION											
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:											
Deposit account number: 501505											
Access Code *****											
Deposit name: Meyertons, Hood, Kivlin, Kowert, Goetzel, P.C.											
Deposit authorized name: Robert Kowert											
Signature: Robert Kowert											
Date (YYYYMMDD): 2004-02-10											
Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.											